

14 CV 6591

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

Hernandez Victor

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

New York City Department of Corrections  
Terrell Laundry # 441+13 10928  
Fuentes C# 16019  
Jane Doe c/o Dept Don't Know

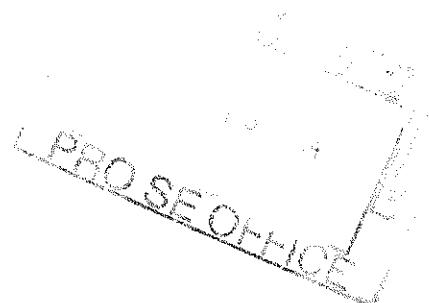
(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

**COMPLAINT**

under the

Civil Rights Act, 42 U.S.C. § 1983  
(Prisoner Complaint)

Jury Trial:  Yes  No  
(check one)



**I. Parties in this complaint:**

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Victor Hernandez  
ID # 349 14 00129  
Current Institution G.R.V.C  
Address 09-09 Hazen Street  
East Elmhurst, N.Y 11370

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name New York City Dept. of Corrections Shield # \_\_\_\_\_  
Where Currently Employed Legal Division  
Address 75-20 Astoria Boulevard  
East Elmhurst, N.Y 11370

Defendant No. 2

Name Jereff Lowery 44113 10928 Shield # \_\_\_\_\_  
Where Currently Employed \_\_\_\_\_  
Address 18-18 Hazen Street \_\_\_\_\_

Defendant No. 3

Name Jane Doe Correction Officer Shield # Don't know  
Where Currently Employed Rikers Island  
Address 18-18 Hazen Street  
East Elmhurst, NY 11370

Defendant No. 4

Name Fuentes, D CO# Shield # 16019  
Where Currently Employed Rikers Island  
Address 18-18 Hazen Street  
East Elmhurst, NY 11370

Defendant No. 5

Name Jezebel Shield # \_\_\_\_\_  
Where Currently Employed \_\_\_\_\_  
Address \_\_\_\_\_

## II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur?

Anna M. Kross Center

B. Where in the institution did the events giving rise to your claim(s) occur?

13 upper inside 2 cell and outside 2 cell

C. What date and approximate time did the events giving rise to your claim(s) occur?

On January 31, 2014 at approximately 10-T am  
11:40

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

D. Facts: At approximately am on January 31, 2014, inmate Hernandez Victor ID# 3491400129, was assaulted by inmate Jerell Lowery ID # . Mr Hernandez was assaulted by Mr Lowery in side 1bs (cell). Mr Hernandez is #2 cell which is located a very close distance to Bubble, where correction officer, Jerebel commands post, and very close, less than 10-20 feet, where correction officer #2 stands guard to Survey and protect inmates. Jerell Lowery entered Mr Hernandez #2 cell and assaulted him causing him severe blood loss with a homemade weapon and also causing him 3 broken fractures to Orbital bone in Face, Fractured Nose and Other Facial Bone by late revealed by Cat Scan at Elmhurst Hospital where he was rushed by EMS after incident happened.

Correction Officers did nothing to stop the situation of inmate Jerell Lowery Assaulting Mr Hernandez to Rob Him of His Commissary he had just finish shopping from.

### III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

- ① Orbital Fracture to Face
2. Fractured Nose
3. Other Facial Fractured

Mr Hernandez received Pain killer and to today July 28, 2012, still in chronic Jaw pain and Back Pain

### IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes  No

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

A.M.I.C.C C-95, 13 upper, 2 cell.

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes  No \_\_\_\_\_ Do Not Know \_\_\_\_\_

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes \_\_\_\_\_ No  Do Not Know \_\_\_\_\_

If YES, which claim(s)? \_\_\_\_\_

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes  No \_\_\_\_\_

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes \_\_\_\_\_ No \_\_\_\_\_

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

Through Grievance Committee

1. Which claim(s) in this complaint did you grieve? Correction officers doing nothing to protect me.

2. What was the result, if any? Nothing.

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.

It was forwarded to Warden and Board of Corrections and nothing was done.

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. If you did not file a grievance but informed any officials of your claim, state who you informed,

when and how, and their response, if any:

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- G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

Justice for inmates at Rikers Island through the grievance process at Rikers Island is Black. You have a better chance at winning the lottery

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- Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). I am seeking that Defendant, inmate Jerell Lowery, ID# 44113 10928 be charged with assault. Aside from that, I am seeking that Correction Officers Fuentes (ID# 16019) that was on post that Day and did nothing to help me from being brutally Beat Up and her partner, Sezebel, dont know her last name, also be held responsible for allowing the Assault to take place he held responsible for my assault. I am seeking Monetary damages in the amount of \$5,000,000 from each individual: the inmate and the two Correction Officers in the total amount of \$15,000,000 for physical and Mental anguish.

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VI. Previous lawsuits:

- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?
- On these claims  Yes  No \_\_\_\_\_

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff Hernandez Victor

Defendants Dont Know my Lawyer What tell Me

2. Court (if federal court, name the district; if state court, name the county) DO KNOWN

3. Docket or Index number Don't Know

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit Sometime in February 2014

6. Is the case still pending? Yes ✓ No \_\_\_\_\_

If NO, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) Don't know

What my Lawyer is doing so I'm going  
to try and represent myself if he  
cannot help me

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

On other claims

Yes        No ✓

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff \_\_\_\_\_

Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending? Yes        No \_\_\_\_\_

If NO, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 28 day of July, 20 14

Signature of Plaintiff

Inmate Number

Institution Address

Victor Hernandez  
34914 00129  
09-09 Haven Street  
East Elmhurst NY 11370

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 28 day of July, 20 14 I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Victor Hernandez